

County: Kewaunee
KEWAUNEE CARE CENTER
1308 LINCOLN STREET

Facility ID: 4820

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KEWAUNEE 54216 Phone: (920) 388-4111
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 70
Total Licensed Bed Capacity (12/31/02): 84
Number of Residents on 12/31/02: 59

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 61

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		47.5
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		37.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.1	More Than 4 Years		15.3
Day Services	No	Mental Illness (Org./Psy)	20.3	65 - 74	11.9			-----
Respite Care	No	Mental Illness (Other)	8.5	75 - 84	35.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	3.4		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	15.3	65 & Over	94.9	-----		
Transportation	No	Cerebrovascular	10.2		-----	RNs		11.4
Referral Service	Yes	Diabetes	6.8	Sex	%	LPNs		8.2
Other Services	Yes	Respiratory	6.8	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	28.8	Male	45.8	Aides, & Orderlies		
Mentally Ill	No		-----	Female	54.2			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All	
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%			Per Diem (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	7	100.0	287	37	97.4	110	0	0.0	0	13	100.0	135	0	0.0	0	1	100.0	250	58	98.3
Intermediate	---	---	---	1	2.6	92	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		38	100.0		0	0.0		13	100.0		0	0.0		1	100.0		59	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							

Percent Admissions from:		Activities of		% Needing				Total	
				Assistance of		% Totally		Number of	
		Daily Living (ADL)		One Or Two Staff		Dependent		Residents	
Private Home/No Home Health 8.6		Bathing 6.8		45.8		47.5		59	
Private Home/With Home Health 5.4		Dressing 10.2		64.4		25.4		59	
Other Nursing Homes 1.1		Transferring 33.9		33.9		32.2		59	
Acute Care Hospitals 80.6		Toilet Use 22.0		55.9		22.0		59	
Psych. Hosp.-MR/DD Facilities 0.0		Eating 74.6		11.9		13.6		59	
Rehabilitation Hospitals 0.0		*****							
Other Locations 4.3									
Total Number of Admissions 93		Continence		% Special Treatments				%	
Percent Discharges To:		Indwelling Or External Catheter		5.1		Receiving Respiratory Care		6.8	
Private Home/No Home Health 18.1		Occ/Freq. Incontinent of Bladder		42.4		Receiving Tracheostomy Care		1.7	
Private Home/With Home Health 13.8		Occ/Freq. Incontinent of Bowel		18.6		Receiving Suctioning		1.7	
Other Nursing Homes 10.6						Receiving Ostomy Care		5.1	
Acute Care Hospitals 1.1		Mobility				Receiving Tube Feeding		3.4	
Psych. Hosp.-MR/DD Facilities 0.0		Physically Restrained		0.0		Receiving Mechanically Altered Diets		16.9	
Rehabilitation Hospitals 0.0									
Other Locations 12.8		Skin Care				Other Resident Characteristics			
Deaths 43.6		With Pressure Sores		6.8		Have Advance Directives		94.9	
Total Number of Discharges		With Rashes		0.0		Medications			
(Including Deaths) 94						Receiving Psychoactive Drugs		50.8	

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		This Facility	Ownership: Proprietary		Bed Size: 50-99		Licensure: Skilled		All Facilities
		%	%	Ratio	%	Ratio	%	Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		72.2	80.0	0.90	83.5	0.86	83.3	0.87	85.1 0.85
Current Residents from In-County		86.4	73.3	1.18	72.9	1.19	75.8	1.14	76.6 1.13
Admissions from In-County, Still Residing		24.7	19.2	1.29	22.2	1.12	22.0	1.12	20.3 1.22
Admissions/Average Daily Census		152.5	136.0	1.12	110.2	1.38	118.1	1.29	133.4 1.14
Discharges/Average Daily Census		154.1	138.5	1.11	112.5	1.37	120.6	1.28	135.3 1.14
Discharges To Private Residence/Average Daily Census		49.2	59.1	0.83	44.5	1.10	49.9	0.99	56.6 0.87
Residents Receiving Skilled Care		98.3	93.4	1.05	93.5	1.05	93.5	1.05	86.3 1.14
Residents Aged 65 and Older		94.9	95.9	0.99	93.5	1.01	93.8	1.01	87.7 1.08
Title 19 (Medicaid) Funded Residents		64.4	73.2	0.88	67.1	0.96	70.5	0.91	67.5 0.95
Private Pay Funded Residents		22.0	16.8	1.31	21.5	1.02	19.3	1.14	21.0 1.05
Developmentally Disabled Residents		0.0	0.9	0.00	0.7	0.00	0.7	0.00	7.1 0.00
Mentally Ill Residents		28.8	33.7	0.86	39.0	0.74	37.7	0.76	33.3 0.86
General Medical Service Residents		28.8	19.3	1.50	17.6	1.63	18.1	1.59	20.5 1.41
Impaired ADL (Mean)		49.8	46.1	1.08	46.9	1.06	47.5	1.05	49.3 1.01
Psychological Problems		50.8	51.2	0.99	54.6	0.93	52.9	0.96	54.0 0.94
Nursing Care Required (Mean)		5.3	7.2	0.74	6.8	0.78	6.8	0.78	7.2 0.74